



...Promoting Communication from Birth

The goal of Early Hearing Detection and Intervention (EHDI) is to identify infants with hearing loss in order to prevent communication disabilities. EHDI programs are implemented at the state level with collaboration and support from federal, state and private organizations. To ensure the success of EHDI programs efficient state tracking systems need to be established so that children with a hearing loss are not lost to follow-up.

Early identification of infants who are deaf or hard of hearing, followed by appropriate interventions, gives these infants a better chance of developing the language and cognitive skills needed to achieve academic and social success. EHDI programs have three components: screening; audiologic evaluation; and early intervention and treatment.



- “ **Screening:** All infants should be screened by 1 month of age, preferably before they are discharged from the birth hospital. Without universal screening, the average age at which hearing loss is identified in children is between 2 and 3 years of age.
- “ **Audiologic Evaluation:** All infants who screen positive for hearing loss should be referred for audiological evaluation. Infants with confirmed hearing loss should be referred for comprehensive medical evaluations. UNHS programs identify 2 to 3 infants per 1000 with a bilateral hearing loss.
- “ **Intervention:** All babies with confirmed hearing loss should be referred to intervention programs. Professionals are responsible for providing families with information about the full range of intervention options so that families can make informed choices.

The Centers for Disease Control and Prevention (CDC) EHDI program is part of the national effort to promote the early detection of hearing loss, the tracking of infants and children who are deaf or hard of hearing, and the initiation of effective intervention systems. The CDC/EHDI Program activities include:

- “ Collaborating with federal, national, and state agencies and organizations in assisting states and territories in developing and implementing EHDI programs.
- “ Providing funds to states to build EHDI data and surveillance systems that will enhance their capacity to ensure that all infants are screened and receive appropriate follow-up services.
- “ Supporting research on the causes of deafness, effectiveness and cost of EHDI programs, long-term outcome of early identification and related family issues.
- “ Using information gained through the EHDI surveillance system to find new, preventable causes of hearing impairment (i.e. genetic).
- “ Maintaining an EHDI website that includes answers to commonly asked questions, screening data, and transcripts of bimonthly teleconferences that deal with current issues related to EHDI programs (<http://www.cdc.gov/nceh/ehdi>).
- “ Promoting the integration of EHDI programs with other Children with Special Health Care Needs data systems.



CDC supports the National Institutes of Health, the Joint Committee on Infant Hearing, and the American Academy of Pediatrics in endorsing universal newborn hearing screening before hospital discharge, diagnostic evaluation by 3 months of age, and initiation of appropriate intervention services by 6 months of age.